12. PEDESTRIAN																			
a. NAME AND ADDRESS	6											b. A	GE	c. S	EX	d. (CATE	GORY	e. INJURY
				1	1	1 1			1	T	_	1							
f. PEDESTRIAN WAS GO	_	N	S] E [W		ALC	NG		ACROSS	s L			STRE	ET, H	ROAD	OR F	lIGHW	ΔY,
FROM (NW to SW corner	r, or east t	to west side	e, etc.)	-								'	го _						·
Crossing With Signal		Cross	ina No	Sign	اد			Stan	dina	on Roads	\\/ 2 \/	,			١٨/	alkino	nin R	nad Δα:	ainet Traffic
				No Signal Standing on Ros															
				 					Coming From Behind Parked Car Pushing or Working on Vehicle				' ⊨	Other					
13. WITNESSES		1	.g		,	·			9	0	.9 0.			I					
		a.	NAME	AND	ADDF	RESS										b.	TELE	PHONE	NUMBER
															+				
14. VEHICLE DAMAGE																			
a. DAMAGEDVE	HICLE NO). 1	ı		DAN	ИAG	EDV	EHIC	LEN	10. 2		Т	DA	MAG	EDTE	RAILE	R. Mo	OTORC	YCLE ETC.
Right Front of Car		Front Door		Rial	ht Fron				Т	ft Front D	oor	1		ch Dar			,		. 022 2 . 0 .
Right Front Fender	Left	Front Fend	er	- ·	ht Fron				Lef	ft Front Fe	ende					•			
Right Front Door	Left	Front of Ca	ar 🗀	Righ	ht Fron	t Do	or		Lef	ft Front of	f Ca	ır							
Right Rear Door	Hood	d		Rigl	ht Rear	Doo	r		Но	od									
Right Rear Fender	Roof	f		Righ	ht Rear	Fend	der		Ro	of									
Right Rear of Car	Trun	ık		Righ	ht Rear	of C	ar		Trι	unk									
Left Rear of Car	Unde	ercarriage		Left	t Rear o	of Ca	r		Un	dercarriaç	ge								
Left Fender	Over	rturn		-	t Fende				Ov	erturn									
Left Rear Door				Left Rear Door							_								
b. SEVERITY OF DAMA			_	-				VEH		ENO. 2			_				_	_	EHICLE
Disabling Damage Functional Damage		r MV Dama amage	ge	7	abling [ictional				1	ner MV Da Damage	amaç	ge		isablin unctio					r MV Damage amage
c. TOWED BY	ן און	amage	T/			Dan	lage		INO	Damage		+		ED BY		Jamaç	ge	INO D	amage
C. TOWEDBT			- '	TOWED BY							- ['	I O VVI	וטטו						
d. TOWED TO			ТС	TOWED TO							17	TOWED TO							
	u. TOWED TO			1525.15															
e DAMAGETO PROPER	TY OTHER	R THAN VE	HICLE																
f. SKETCH OF COLLISIO			-										-				-		
skidmarks, unusual/temp pedestrain or object pos			-											-				3) Sho	w vehicle,
NORTH =	sitions at	, iiiipact. (4/ 311	ow pi	iobabit	s vei	IICIE	oi pe	ues	itilali pati	15 D	CIOI	e anu	aitei	COIII	151011.	•		
I																			
g. DESCRIPTION OF CO	LLISION.	Indicate v	vhat pr	obabl	ly happ	ene	d bef	ore,	durii	ng, and a	fter	the	crasl	n; incl	ude i	inforr	matio	n not o	n sketch,
e.g., driver disability, re																			

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15a. DRIVER'S AC				1							
DIRECTION	DRIVER (Check one or more)	DRIVER	R (Check one or more)	VE	HICLE (Spe	cify Feet/M	1PH)				
HEADED	1 2	1 2	Other (Specify)	1	2						
	Backing					Estim	ated Dis	tance W	Vhen		
VEHICLE 1	Going Straight Ahea	d				Dange	er Was F	irst Not	iced		
□ N □ S □	Making Left Turn					Estim	ated Spe	ed Whe	en		
E	Skidding						er was Fi				
	Making Right Turn				+		ated Spe				
VEHICLE 2						(MPH		eeu at ii	Tipaci		
VEHICLE 2	Making "U" Turn				-						
N S	Overtaking or Passin	g					nce Trav		ter		
	Avoiding Veh/Obj					Impac	ct <i>(Feet)</i>				
l L	Slowing or Stopping					Lawfu	ıl Speed	(MPH)			
	Stop in Traffic Lane							1			
b. CONTRIBUTING	CIRCUMSTANCES										
DRIVER (Check of	ne or more)	DRIVER	(Check one or more)		DRIVER (C	Check one o	r more)				
1 2		1 2]	•	1 2						
	ing Speed Limit	 	Alcohol Involved			Chemical Te	et Giver	2			
					 						
	Excessive for Conditions		Drugs Involved			Chemical Te		sea			
Failed t			Ability Impaired		TEST RESULTS						
Disrega	rdedStop Signal		Ability Not Impaired		DRIVER I	NO. 1	DRI	VER NO	. 2		
Vision	Obstructed		Unknown		%	BAC	%	BA	_		
Followi	ng Too Close		1		70	DAC	70	DV.	ا		
	er Overtaking		See attached DD Form	1920 <i>(Alcohi</i>	olic Influence	Renort)					
	nproper Signal	VEHICLE	(Check one or more)	1020 1	Jilo IIIII de	Пороле,					
			Check one or more; 								
	rdedTraffic Signal	1 2	_ ,								
Improp			Defective Brakes						ļ		
Unknov			Defective Head Lights						ļ		
Other ((Specify)		Tires Worn or Smooth						ļ		
			Tires Punctured or Blov	wn					ļ		
				. •					i		
			TUTNER (Specify)								
1			Other (Specify)								
			Other (Specify)								
			Other (Specify)								
			Other (Specify)								
16. MILITARY POL	ICE ACTIVITY		Other (Specify)								
	ICE ACTIVITY IE OF PERSON(s) APPREHENDI	ED.		ARGES		c. REP	ORT NU	MBER			
		ED.		ARGES		c. REP	ORT NU	MBER			
		<u></u> ED		ARGES		c. REP	ORT NU	MBER			
		<u>=</u> D		ARGES		c. REP	ORT NU	MBER			
		≣D		ARGES		c. REP	ORT NU	MBER			
a. NAN	IE OF PERSON(s) APPREHENDI	5D	b. CH					MBER			
a. NAN		ED			ED AT ACCID			MBER YES	NO		
a. NAN	POLICE NOTIFIED (Hour)	ED	b. CH,	OLICE ARRIVI		ENT <i>(Hour,</i>			NO		
a. NAN	IE OF PERSON(s) APPREHENDI	ED	e. TIME MILITARY P	OLICE ARRIVI		ENT <i>(Hour,</i>			NO		
a. NAN	POLICE NOTIFIED (Hour)	ED	b. CH,	OLICE ARRIVI		ENT <i>(Hour,</i>			NO		
a. NAN d. TIME MILITARY f. WHERE ELSE W.	POLICE NOTIFIED (Hour) AS INVESTIGATIONMADE?		e. TIME MILITARY P	POLICE ARRIVI PERATOR COM ion Card)?	MPLETE DD FO	ENT <i>(Hour,</i> DRM 518			NO		
d. TIME MILITARY f. WHERE ELSE W. g. IF OFF MILITA	POLICE NOTIFIED (Hour)	SE	e. TIME MILITARY P h. DID MILITARY OF	POLICE ARRIVI PERATOR COM ion Card)? ERATOR COM	MPLETE DD FO	ENT <i>(Hour,</i> DRM 518			NO		
a. NAM d. TIME MILITARY f. WHERE ELSE W. g. IF OFF MILITA CONDUCTED AN IN	POLICE NOTIFIED (Hour) AS INVESTIGATIONMADE?	SE	e. TIME MILITARY P h. DID MILITARY OF (Accident Identificati i. DID MILITARY OPI (Motor Vehicle Accident)	POLICE ARRIVI PERATOR COM From Card)? PERATOR COM Pent Report)?	PLETE SF FO	ENT <i>(Hour,</i> DRM 518 RM 91)		NO		
a. NAM d. TIME MILITARY f. WHERE ELSE W. g. IF OFF MILITA CONDUCTED AN IN	POLICE NOTIFIED (Hour) AS INVESTIGATIONMADE? ARY RESERVATION, WHO ELS	SE	e. TIME MILITARY P h. DID MILITARY OF (Accident Identificati i. DID MILITARY OPI (Motor Vehicle Accid j. WAS FORM COME	POLICE ARRIVI PERATOR COM From Card)? PERATOR COM Pent Report)?	PLETE SF FO	ENT <i>(Hour,</i> DRM 518 RM 91)		NO		
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